

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.

BY: Gladys C. Morales Date: March 9, 2005

MAIL STOP AMENDMENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:
Sigurd Sigbjornsen *et al.*

Conf. No.: 3808

: Group Art Unit:

Appln. No.: 10/752,429

: Examiner:

Filing Date: January 6, 2004

: Attorney Docket No.: 10532-4U2

Title: PROTECTION OF SOFTWARE CODE FROM UNAUTHORIZED USE BY
EXECUTING PORTIONS OF THE CODE IN A SECURE COMPUTER
ENVIRONMENT SEPARATE FROM THE ENVIRONMENT THAT
EXECUTES THE REMAINING PORTIONS OF THE CODE

AMENDMENT TRANSMITTAL LETTER

Transmitted herewith is an Amendment in the above-identified application.

Small Entity Status has been previously claimed.

The additional claim fees have been calculated as follows:

					SMALL ENTITY		LARGE ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	41	(-)	33	8	x25	200	x50	
INDEP.	8	(-)	8	0	x100	0	x200	
[] 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					+\$180		+\$360	
					TOTAL	\$200	TOTAL	

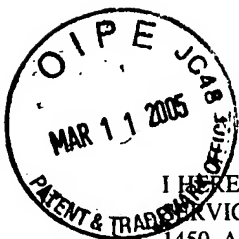
The additional claim fees are being paid by:

<input checked="" type="checkbox"/>	A check in the amount of <u>\$200.00</u> .
<input checked="" type="checkbox"/>	Authorization to charge and/or credit Deposit Account No. 50-1017 (Billing No. 210532.0008) as noted below. A duplicate copy of this sheet is enclosed.
<input checked="" type="checkbox"/>	Any overpayments or deficiencies in the above-calculated fee.
<input type="checkbox"/>	Additional claim fee in the amount of \$____.00 as calculated above.
<input checked="" type="checkbox"/>	Any additional fees required under 37 C.F.R. § 1.16 and/or § 1.17.
<input checked="" type="checkbox"/>	In the event that a Petition for Extension of Time is required, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account.

Respectively submitted,

Sigurd Sigbjornsen *et al.*

March 9, 2005 By: Clark Jablon
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PRELIMINARY AMENDMENT

This paper is being filed before receipt of a first Office Action. An Amendment Transmittal Letter is enclosed for payment of the excess claim fee. If any additional fee is due, charge the fee to Deposit Account No. 50-1017 (Billing No. 210532.0008).

Amendments to and Listing of the Claims begin on page 2 of this paper.

Remarks and Conclusion begin on page 8 of this paper.

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